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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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CORRESPONDENCE ADDRESS**

Application Number	10/509,502
Filing Date	Sept. 28, 2004
First Named Inventor	ASCHER, et al
Art Unit	
Examiner Name	
Attorney Docket Number	32413A

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
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The reasons for this request are: File Transfer

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<input checked="" type="checkbox"/> Firm or Individual Name	D. Peter Hochberg Co., LPA		
Address	1940 East 6th Street, 6th Floor		
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Name	John D. Thallemer	Registration No.	34,940
Date	May 16, 2006	Telephone No.	(609) 6278507

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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